

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-115)

ACLU NO. 10381841
FILING DATE
NOT USED

CLAIMS

	AS FILED		AFTER AMENDMENT		AFTER AMENDMENT			AS FILED		AFTER AMENDMENT		AFTER AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2							52						
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45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.			↓	2		↓							
TOTAL DEP.			←	16	←	←							
TOTAL CLAIMS			████████	18	████████	████████							
							↓						
							←						
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